PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number

10/561365

| CLAIMS AS FILED - PART I | | | | | | | | SMALL ENTITY TYPE | | OR | OTHER THAN SMALL ENTITY | | |
|--|--|---------------------------------|---|-----------------------|--|------------------|-----|---------------------|------------------------|--------|----------------------------|------------------------|---|
| | | | (Column 1) | | (Column 2) | | | | · |) I | OMALL | | |
| U.S. NATIONAL STAGE FEES | | | · | | | | | RATE | FEE | • | RATE | FEE | |
| BASIC FEE | | | SMALL ENT. | = \$ 150 | LARGE ENT. = \$ 300 | | | BASIC FEE | | OR | BASIC FEE | 300 | |
| EXAMINATION FEE | | | Satisfies PCT Art (4) = \$50/ | | All other situations = \$ 100 / \$ 200 | | | EXAM. FEE | | | EXAM. FEE | 200 | |
| SEARCH FEE | | | U.S. is ISA = \$ ALL other cour \$ 200 / \$ 4 | ntries = | All other situations = \$ 250 / \$ 500 | | | SEARCH FEE | | | SEARCH FEE | 400. | |
| FEE FOR EXTRA SPEC. PGS. | | | minu | s 100 = | / 50 = | | | X \$ 125 = | | | X \$ 250 = | | l |
| TOTAL CHARGEABLE CLAIMS | | | 22 min | us 20 = | • 2 | | | X \$ 25 = | | OR | X \$ 50 = | 100 | |
| INDEPENDENT CLAIMS | | | . 2, m | inus 3 = | • . | | | X \$ 100 = | | OR | X \$ 200 = | | |
| MUL | TIPLE DEPEND | DENT CLAIM PRE | ESENT | | | | | + \$ 180 = | | OR | + \$ 360 = | . • | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | | · TOTAL | · | OR | TOTAL | 1000 | |
| CLAIMS AS AMENDED - PART II | | | | | | | | | | i | OTUED: | 1130 | |
| | . \ | | MINIEINDED, | | | | | SMALL ENTITY | | OR | OTHER THAN SMALL ENTITY | | l |
| AMENDMENT A | - | (Column 1) | <u> </u> | (Cotu | | (Column 3) | 1 | | ADDI- | 1 | | ADDI- | İ |
| | 6,28,01 | REMAINING AFTER AMENDMENT | | PREVI PAID | OUSLY | PRESENT EXTRA | | RATE | TIONAL FEE | | RATE | TIONAL FEE | |
| | Total | . 22 | Minus | ő | 22 | | | X \$ 25 = | | OR | X \$ 50 = | | |
| | Independent | . 2 | Minus | *** | 3 | | | X \$ 100 = | | OR | X \$ 200 = | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | + \$ 180 = | | OR | + \$ 360 = | | l |
| | | | | | | | • | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. | | L |
| | | | | (0.1 | | 40-1 | | | | | | | |
| | | (Column 1) CLAIMS | | (Colu | | (Column 3) | 1 | | 4221 | ı | | | l |
| AMENDMENT B | | REMAINING AFTER AMENDMENT | , | NUM PREVIO PAID | BER OUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | • | RATE | ADDI- TIONAL FEE | |
| | Total | • | Minus | ** | | = | | X \$ 25 = | | OR | X \$ 50 = | | |
| | Independent | * | Minus | *** | | = | | X \$ 100 = | | OR | X \$ 200 = . | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | + \$ 180 = | | OR | + \$ 360 = | | |
| | | | | | | | • ' | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | | |
| | | | | | | • | | | · : | | , | | |
| | _ • | | | | | | | | | | | | |

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

^{**} If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20".

^{***} If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".

The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.